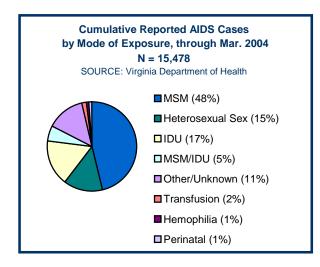
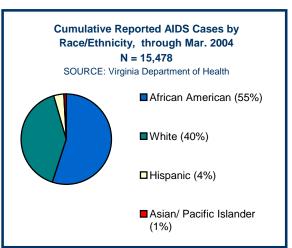


HIV/AIDS, STD & TB Prevention VIRGINIA

HIV/AIDS Epidemic

Virginia reported 15,723 cumulative AIDS cases to CDC as of December 2003.





Sexually Transmitted Diseases (STDs)

Syphilis

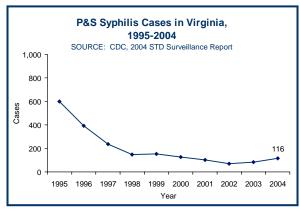
Primary and secondary (P&S) syphilis (the stages when is most infectious) remains a problem in the southern U.S. and some urban areas. In Virginia, the rate of P&S syphilis decreased 82% from 1995-2004

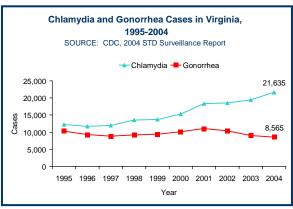
- Virginia ranked 25th among the 50 states with 1.6 cases of P&S syphilis per 100,000 persons.
- The number of congenital syphilis cases decreased from 25 in 1995 to 6 in 2004.

Chlamydia and Gonorrhea

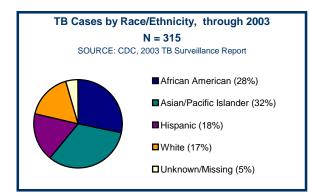
Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

- Virginia ranked 30th among the 50 states in chlamydial infection (292.9 per 100,000 persons) and 16th in the rate of gonorrhea infections (116 per 100,000 persons).
- Rates of chlamydia among Virginia women (441.5 cases per 100,000 females) were 3.2 times greater than those among Virginia men (138.3 cases per 100,000 males).





Tuberculosis (TB)



Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Virginia reported

- ☐ The 19th highest rate of TB in the U.S.
- □ A total of 332 TB cases with 32% affecting Asian/Pacific Islanders and 28% affecting African Americans. In all, about 61% were among foreign-born persons.

Program Initiatives Supported by CDC

HIV/AIDS

Council of Community Services in Roanoke, Virginia, provides HIV prevention services to African-American communities. This organization was funded under CDC's new community-based organization program to provide HIV prevention services to groups at high risk for HIV infection regardless of their race/ethnicity. This organization specifically targets African-American men who have sex with men.

| National Center for | |
|-----------------------|-------------|
| HIV, STDs & TB | |
| Prevention Funding to | |
| Virginia, 2005 (US\$) | |
| HIV/AIDS | \$7,070,281 |
| STDs | \$2,349,934 |
| ТВ | \$1,281,639 |

Sexually Transmitted Diseases (STDs)

The Division currently administers a Behavioral Risk Assessment Survey to STD clinic attendees at the Richmond City Department of Public Health to

provide descriptive analyses and evaluation of behavioral risk characteristics for STDs among clinic attendees. The survey, which ended on 9/23/05, was part of the Outcomes Assessment through Systems of Integrated Surveillance (OASIS) grant, which specifically targeted gonorrhea behavioral risks. Test results of participants were linked to survey responses retrospectively in order to provide cross comparisons of behavioral and social demographics among those infected with various STDs. Data from the survey are analyzed and used to ensure targeted prevention, education and surveillance initiatives are implemented.

Tuberculosis (TB)

Virginia implemented the Homeless Incentive Program (HIP) which was designed to provide temporary housing assistance for tuberculosis (TB) patients who are homeless, or where current living conditions represent a barrier to adherence or completion of treatment. Its secondary purpose is to prevent the at risk patient from becoming truly homeless by enabling him/her to remain in the current housing arrangement. All patients are required to be on DOT, and in 2003, there were 84 placements for housing or food assistance.

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